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## BIB DATA SHEET

CONFIRMATION NO. 7202

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/760,129	01/16/2004 RULE	600	3738	ENDOV-63893
<b>APPLICANTS</b> Peter S. Brown, Palo Alto, CA; Marceyn A. Berlo, San Francisco, CA; Tina A. Ton, San Jose, CA; Kim-Lien Dang, San Jose, CA; Veronica Creech, Newark, CA; Joanne L. Parker, Fremont, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/165,763 06/07/2002 PAT 7,261,733				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/22/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/CHERYL L MILLER/</u> <small>Examiner's Signature</small>	<input type="checkbox"/> Met after Allowance <small>Indicate</small>	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 12	<b>TOTAL CLAIMS</b> <del>27</del> <sup>11</sup>
<b>INDEPENDENT CLAIMS</b> <del>6</del> <sup>1</sup>				
<b>ADDRESS</b> RATNER PRESTIA P.O. BOX 980 VALLEY FORGE, PA 19482 UNITED STATES				
<b>TITLE</b> Endovascular graft with pressor and attachment methods				
<b>FILING FEE RECEIVED</b> 1434	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	